

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BA</i>	70385	
O.I.P.E. CLASSIFIER		49	
FORMALITY REVIEW			8/16/00
RESPONSE FORMALITY REVIEW			

APPLICANTS

TITLE

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PossessionForm PTO-49  
(Rev. 6/98)

## INDEX OF CLAIMS

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Non-elected  
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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